Complete Summary

TITLE

HIV: percentage of pediatric patients for whom adherence is assessed and quantified at least once every 4 months.

SOURCE(S)

New York State Department of Health AIDS Institute HIV Quality of Care Program. Pediatric indicators. [internet]. New York: New York State Department of Health AIDS Institute; 2000-2004 [cited 2005 Aug 10]. [2 p]. Available: http://www.hivguidelines.org/public_html/center/quality-of-care/qoc-ny-indicator/peds-indicators.pdf.

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of pediatric patients who are on antiretroviral therapy for whom adherence is assessed and quantified at least once every 4 months.

This measure is one of 12 New York State Department of Health AIDS Institute, HIV Quality of Care Program, <u>Pediatric Indicators</u>.

RATIONALE

The AIDS Institute is committed to promoting, monitoring and supporting the quality of HIV clinical services for people with HIV in New York State. Clinical quidelines are developed in accordance with newly emerging clinical and research

developments. By developing indicators based on the guidelines, the AIDS Institute has created a mechanism for measurement of HIV clinical performance.

These indicators measure critical aspects of the HIV Clinical Management for pediatric HIV-infected patients.

Note: Although developed in New York State, these indicators are intended to be used by clinicians caring for patients with HIV in an ambulatory care setting in any locale.

PRIMARY CLINICAL COMPONENT

HIV; antiretroviral (ARV) therapy; adherence

DENOMINATOR DESCRIPTION

All pediatric HIV-infected patients prescribed antiretroviral (ARV) therapy (see the related "Denominator Inclusions/Exclusions" field in the Complete Summary)

NUMERATOR DESCRIPTION

The number of patients for whom adherence is assessed and quantified at least once every 4 months

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence
- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

New York State Department of Health AIDS Institute. Clinical management of HIV infection. Quality of care performance in New York State 1999-2001. New York: New York Department of Health AIDS Institute; 2003 Sep 1. 62 p.

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Ambulatory Care

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses Physician Assistants Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Ages 6 months to 13 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

More than 6,000 children younger than age 13 at diagnosis are estimated to be living with HIV/AIDS in the United States.

EVIDENCE FOR INCIDENCE/PREVALENCE

Centers for Disease Control and Prevention. HIV/AIDS surveillance report, 2004. Vol. 16.Atlanta (GA): US Department of Health and Human Services, Centers for Disease Control and Prevention; 2005. 46 p.

ASSOCIATION WITH VULNERABLE POPULATIONS

Minority and risk groups, including poverty populations, medically uninsured, immigrants, and homeless persons

EVIDENCE FOR ASSOCIATION WITH VULNERABLE POPULATIONS

Centers for Disease Control and Prevention. HIV/AIDS surveillance report, 2004. Vol. 16.Atlanta (GA): US Department of Health and Human Services, Centers for Disease Control and Prevention; 2005. 46 p.

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Living with Illness

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

- All HIV patients aged 6 months to 13 years*
- Patients who are either receiving antiretroviral (ARV) therapy, received ARV in the past, or are eligible for ARV therapy based upon current New York State ARV therapy guidelines.

DENOMINATOR SAMPLING FRAME

^{*}During the quality of care reviews a more selective criteria is applied in determining which cases are reviewed: for the pediatric indicators it is all pediatric HIV-infected patients with one primary care visit in the last six months of the calendar year of review.

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All pediatric HIV-infected patients prescribed antiretroviral (ARV) therapy

Exclusions

- Patients with no medical visits occurring in last 6 months of year
- Patients less than 6 months and greater than 13 years of age

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition Encounter Therapeutic Intervention

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of patients for whom adherence is assessed and quantified at least once every 4 months

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

External comparison at a point in time External comparison of time trends Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Review tools are pilot tested by peer review agent prior to full implementation.

The sample size is constructed by a statistical consultant based on a facility's caseload to ensure reliability. A statewide HIV Quality of Care Advisory Committee reviews indicators to ensure validity.

EVIDENCE FOR RELIABILITY/VALIDITY TESTING

Hatton TE. (Quality of Care Program Manager, AIDS Institute - NYSDOH). Personal communication. 2006 Mar 13. 1p.

Identifying Information

ORIGINAL TITLE

Treatment adherence.

MEASURE COLLECTION

New York State Department of Health AIDS Institute, HIV Quality of Care Program Indicators

MEASURE SET NAME

Pediatric Indicators

DEVELOPER

New York State Department of Health AIDS Institute

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2000 Jul

REVISION DATE

2004 Jun

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

New York State Department of Health AIDS Institute HIV Quality of Care Program. Pediatric indicators. [internet]. New York: New York State Department of Health AIDS Institute; 2000-2004 [cited 2005 Aug 10]. [2 p]. Available: http://www.hivguidelines.org/public_html/center/quality-of-care/qoc-ny-inidicator/peds-indicators.pdf.

MEASURE AVAILABILITY

The individual measure, "Treatment Adherence," is available in Portable Document Format (PDF) from the New York State Department of Health AIDS Institute Website.

COMPANION DOCUMENTS

The following are available:

 New York State Department of Health AIDS Institute. The HIV Quality of Care Program. New York (NY): New York State Department of Health AIDS Institute; 2004 Jun 1. 33 p. This document is available in Portable Document Format (PDF) from the <u>New York State Department of Health AIDS Institute</u> Web site.

- A consumer's guide to quality in HIV care in New York State. New York: New York State Department of Health AIDS Institute; 2003 Sep 1. 11 p. This document is available in PDF from the <u>New York State Department of Health</u> AIDS Institute Web site.
- New York State Department of Health AIDS Institute. Clinical management of HIV infection. Quality of care performance in New York State 1999-2001. New York: New York Department of Health AIDS Institute; 2003 Sep 1. 62 p. This document is available in PDF from the <u>New York State Department of Health</u> AIDS Institute Web site.

NQMC STATUS

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